

# STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s): W. Joh	nn Funk; Paul A. Worsowic	ez; Lisa K. Shapiro, Ph.D.; Robert J. Dietel
II. Name of Lobbyist's partnership, firn	n or corporation, if any:	
	LAGHER, CALLAHAN &	•
603-228-1181	603-226-3334	funk@gcglaw.com
(Telephone)	(Fax)	(Email)
III. This statement covers: (Choose one reportable expense transactions which a		each client, OR you may file a separate report for one client.)
X All reportable transactions occurring	ng in the month prior to the r	eporting date relative to the following client.
FIDELITY INS	TITUTIONAL ASSET MA	ANAGEMENT TRUST COMP
(Full Name of C	Client as it appears on the Lol	bbyist Registration Form)
O.D.		
All reportable transactions by the lounrelated to any particular client.	obbyist (including the lobbyi	ist's family), or the lobbying firm listed below which a
IV. Date of Report: April 24, 201	۸ 🔽	L.J., 21, 2010. □
		July 31, 2019
	registration to 3/31/19	activity from 4/1/19 to 6/30/19
October 30, 2	019 🗖	January 29, 2020 🛚
activity from 7/1/19	v to 9/30/19	activity from 10/1/19 to 12/31/19
V. There have been no fees received and If this box is checked, complete just this for Concord, NH 03301.		s made since the last report.  etary of State's Office, State House, Room 204,
VI. Check if additional reports are atta  X If you have received fees or made e		Addendum A – Fees and Expenses
If you have paid an honorarium or Expense Reimbursement		ust file Addendum B – Report of Honorariums or
if you, your firm, or your family ha	is made pointeat contribution	ns, you must file Addendum C - Political Contribution
Sworn Statement/Affirmation by Lobbyi I have read RSA 15, RSA 15-B and RSA 6 to the best of my knowledge and belief.		m that the foregoing information is true and complete
· W ( (	<u></u>	4-23-19
(Signature of Lobbyts)		(Date)
W. John Funk		
(Print Name of lobbyist)		
		RECEIVED
		3
		APR 2 4 2019
		NEW HAMPSHIRE
		DEPARTMENT OF SYATE

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### STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II Nama of labbuists	noutnoushin flum or convention if any			
II. Name of lobbyist's	partnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & GARTRI			
	(Name of partnership, firm or corporat	ion)		
III. Name of Client	FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMP	Date —	April 24, 2	019
lobbying, including fees	nt of all fees received from the client identified above s for services such as public advocacy, government rel itoring legislation, and related legal work. The gross	ations, or 1	public relation	ns services,
a) Total of all fees rece	ived in this reporting period		a) \$	2,000.0
	ived this calendar year, prior to this reporting period. he total prior monthly reports for this calendar year.)		b) \$	
c) Total of all fees rece (Add lines a and b)	ived to date.		c) \$	2,000.0
d) Indicate the amount yet been paid.	of any such fees that are due, but have not		d) \$	.0
fees. Separate reports a lobbyist(s)/firm that are are to be reported in or reporting period for sa expenses where the expenses where the expenses of a ceremonistatement of each individual covered by (a) (for exargiven to the subject of legislative reception).	partnerships, firms, or corporations are required to reare to be filed for expenditures made relative to each control and the angular to any one client a separate report may be need three categories of expenses: (a) the aggregalaries, benefits, support staff, and office expenses; (a) the aggregalaries, benefits, support staff, and office expenses; (benditure was of \$25.00 or less (for example: meals pless, purchase of a pen with a value of less than \$10 that object given to a person being lobbied with a value dual expenditure made during this reporting period of an angular purchase of a meal with value of greater than \$25 to be lobbying with a value greater than \$25, but not green expenses for honorariums, expense reimbursement, of and should not be reported on Addendum A.	lient and iffiled for the total of (b) the agourchased that is given of \$25.00 greater than \$25, purchaset than \$25.00 greater	f expenditure he lobbyist(s f all expense gregate total during a busion to the person or less); an \$25.00 fo se of a cerem \$50, restaurant	s are made by )/firm. Expen s paid during of all individuess lunch whon being lobbid (c) an itemizary purpose onial object tont expenses for
support staff, and office	enses for this reporting period for salaries, benefits, expenses, related directly or indirectly to lobbying.	a) \$ b) \$	•	1,800.00
<ul><li>b) Total aggregate of exin a), of \$25 or less.</li></ul>	expenditures during this reporting period, not reported			.00
a). Total of all itomicod	expenditures reported in detail in section VI.	c) \$		200.00

d) Total expenses for this reporting period.  (Add lines a, b and c.)	d) \$	2,000.00
e) Total of expenses paid this calendar year, prior to this reporting period.  (This should be the amount on line f of addendum A for last month's report.)	e) \$	
f) Total of all expenses year to date.	f) \$	2,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying period, including by whom paid or to whom charged.	fees during this	reporting
Paid to:	Amo	ount
State of NH	\$	200.00
	\$	
	\$	
	<b>\$</b>	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that t is true and complete to the best of my knowledge and belief.	he foregoing in	formation
(Signature of lobbyist)	4-23	-19
W. John Funk	(Date)	
(Print Name of Lobbyist)		

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMP

#### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

Statement of Income and Expenses for:				
Name of Lobbying partne	ership, firm or corporation	n: GALLAGHER, CALL	AHAN & GARTRELL, P.C.	
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):  Fidelity Institutional Asset Management Trust Comp				
Date of Report (check on	e):			
April 24, 2019 🔀	July 31, 2019 🗆	October 30, 2019 🗆	January 29, 2020 □	
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):				
1 Addendum A(s).				
0 Addendum B(s).				
0 Addendum C(s).				
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.				
aks.			4-23-19	
(Signature of Lobbyist) (Date)				
Lisa K. Shapiro, Ph.D.  (Print Name of lobbyist)				

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbvist

Statement of Income and Expenses for:					
Name o	Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.				
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Fidelity Institutional Asset Management Trust Comp					
Date of Report (check one):					
April 24	ı, 2019 🔀	July 31, 2019 🗆	October 30, 2019 🗆	January 29, 2020 □	
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):					
<u>l</u> A	ddendum A(s)				
<u>0</u> A	ddendum B(s)				
<u>0</u> A	ddendum C(s)				
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.					
(Size 6	m 1 On	7		4/17/19 (Date)	
	turd of Lobbyi	st)		(Date)	
***	rt J. Dietel Name of lobby	viet)			
TILL I I I I I I I I I I I I I I I I I I	Trainic Of 1000	7131 <i>)</i>			